

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

10248755

**CLAIMS AS FILED - PART I**

|   | (Column 1)           | (Column 2)               |
|---|----------------------|--------------------------|
| <b>TOTAL CLAIMS</b>                     | <b>20</b>            |                          |
| FOR                                     | NUMBER FILED         | NUMBER EXTRA             |
| <b>TOTAL CHARGEABLE CLAIMS</b>          | <b>20</b> minus 20 = | <b>0</b>                 |
| <b>INDEPENDENT CLAIMS</b>               | <b>3</b> minus 3 =   | <b>0</b>                 |
| <b>MULTIPLE DEPENDENT CLAIM PRESENT</b> |                      | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

| AMENDMENT A   | (Column 1)                                | (Column 2) | (Column 3)                                  |                          |
|---|---|------------|---|--------------------------|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total   | 20  | Minus      | 20  | 0                        |
| Independent   | 3   | Minus      | 3   | 0                        |
| <b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> |   |            |   | <input type="checkbox"/> |

**SMALL ENTITY  
TYPE**  **OTHER THAN  
OR SMALL ENTITY**

| RATE      | FEE   | RATE      | FEE   |
|-----------|-------|-----------|-------|
| BASIC FEE | \$375 | BASIC FEE | \$750 |
| X\$ 9=    |       | X\$18=    |       |
| X42=      |       | X84=      |       |
| +140=     |       | +280=     |       |
| TOTAL     |       | TOTAL     | 750   |
| OR        |       | OR        |       |

**SMALL ENTITY  
OR** **OTHER THAN  
SMALL ENTITY**

| RATE               | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9=             |                        | X\$18=             |                        |
| X42=               |                        | X84=               |                        |
| +140=              |                        | +280=              |                        |
| TOTAL<br>ADDT. FEE |                        | TOTAL<br>ADDT. FEE |                        |
| OR                 |                        | OR                 |                        |

| AMENDMENT B   | (Column 1)                                | (Column 2) | (Column 3)                                  |                          |
|---|---|------------|---|--------------------------|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total   | 15  | Minus      | 20  | 0                        |
| Independent   | 3   | Minus      | 3   | 0                        |
| <b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> |   |            |   | <input type="checkbox"/> |

| RATE               | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9=             |                        | X\$18=             |                        |
| X42=               |                        | X84=               |                        |
| +140=              |                        | +280=              |                        |
| TOTAL<br>ADDT. FEE |                        | TOTAL<br>ADDT. FEE |                        |
| OR                 |                        | OR                 |                        |

| AMENDMENT C   | (Column 1)                                | (Column 2) | (Column 3)                                  |                          |
|---|---|------------|---|--------------------------|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total   | 15  | Minus      | 20  | 0                        |
| Independent   | 3   | Minus      | 3   | 0                        |
| <b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> |   |            |   | <input type="checkbox"/> |

| RATE               | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9=             |                        | X\$18=             |                        |
| X42=               |                        | X84=               |                        |
| +140=              |                        | +280=              |                        |
| TOTAL<br>ADDT. FEE |                        | TOTAL<br>ADDT. FEE |                        |
| OR                 |                        | OR                 |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.